

USPS TRACKING #

9590 9402 5947 0062 1120 81

United States Postal Service

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-40

• Sender: Please print your name, address, and ZIP+4® in this box •

08 JUN 2023 PM 3 L

SAN ANTONIO, TX 78201  
RIO GRANDE DISTRICT

Clerk, U.S. District Court  
282 W. Nueva St., Room 1-400  
San Antonio, TX 78207

SA-22-CV-1142-FB #12

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Raymond Kim  
123 Arrow Oaks  
San Antonio, TX 78249

9590 9402 5947 0062 1120 81

2. Article Number (Transfer from carrier label)  
7020 0640 0000 5220 9234

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature  
*Kim, Raymond* ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
*Kim, Raymond*

C. Date of Delivery  
*6/5/23*

D. Is delivery address different from item 1? ☐ Yes ☐ No  
If YES, enter delivery address below:

RECEIVED

JUN 8 2023

CLERK, U.S. DISTRICT COURT

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input checked="" type="checkbox"/> Certified Mail®	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

Domestic Return Receipt